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MAY 2 1 2004	U.S. Patent and 11 administration of the control number no persons are required to respond to a control of into mation unless it contains a valid OMB control number.

DESLARATION — Utility or Design Patent Application						
Direct all correspondence to:   Customer Number or Bar Code Label	29895	C? [		spondence address below		
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Telephone 203-265-31-18  Fax Same  I hereby decisive that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge; that willful false statements and the like so are believed to be true; and further that these statements were made with the knowledge; that willful false statements may jeopardize the made are purishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patient issued thereon.						
NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned Inventor						
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NAME OF SECOND INVENTOR:  A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		amily Name r Sumame				
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Residence: City	State	Country		Citizenship		
Malling Address						
City	State	ZIP		Country		
Additional inventors are being named on thesupplemental Additional inventor(s) s				D/SB/02A attached hereto.		

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